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RECEIVED
MAY 16 2016

◆ 25775 MEADOWBROOK
NOVI, MI 48375
CAP NO: 5000001

◆ 1540 LAKE LANSING ROAD, STE G04
LANSING, MI 48912
CAP NO: 7199837 Page: 1

De Kang

1062
CMH PROGRAM
WESTLAND COUNSELING CENTER
8623 N. WAYNE RD STE 310
WESTLAND, MI 48185

PATIENT NAME: BY PELICHET, DARRYL
D.O.B. 03/04/1979 SEX: M
COLLECTED: 04/29/2016 Age
RECEIVED: 05/11/2016 37Y
REPORTED: 05/12/2016

ACCESSION NO: 161325008
PHONE NO:
PT. ID NO:
STATUS: FINAL
OTHER ID:

TEST NAME

RESULTS

REFERENCE RANGE

OUT OF RANGE

IN RANGE

U R I N E C H E M I S T R Y

UA CREATININE

53.9

>= 20

mg/dL

U R I N E T O X I C O L O G Y

DRUG SCREEN 4 PANEL

BENZODIAZEPINES

NEGATIVE

CUTOFF 200 ng/mL

CANNABINOIDS-50

NEGATIVE

CUTOFF 50 ng/mL

COCAINE

NEGATIVE

CUTOFF 300 ng/mL

OPIATES

NEGATIVE

CUTOFF 2000 ng/mL

**This is a screen only, as ordered. Confirmation testing of individual tests shall be performed upon request. Unconfirmed screening results are to be used only for medical (treatment) purposes. Unconfirmed screening results must not be used for non-medical purposes (e.g., employment testing, legal testing).

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en 5/12/16